\sim	T	-
ν_{μ}	1 P N	ı

Attorney's Docket No.
Applicant or Patentee: Jonathan S. Nimitz and Lance H. Lankford
Serial or Patent No.: 0 /
Filed or Issued:
For:
VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(b))—INDEPENDENT INVENTOR
As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled Fluoroiodocarbon Blends as CFC and Halon Replacements
described in
the specification filed herewith.
application serial no. 0 /, filed
patent no, issued
I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).
Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:
no such person, concern, or organization
persons, concerns or organizations listed below*
*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).
FULL NAME Jonathan Shelley Nimitz ADDRESS 3300 Mountain Road NE
Albuquerque, NM 87106-1920
FULL NAME Lance Harrell Lankford
ADDRESS 290 Welcome Road
Newcastle, CA 95658
▼ INDIVIDUAL
FULL NAME
ADDRESS
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of pay-

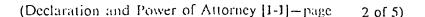
(Small Entity-Independent Inventor [7-1]—page 1 of 2)

ing, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Jonathan S. Nimitz	
Signature of Inventor	Date March 5, 1993
Lance H. Lankford	
Name of inventor Signature of Inventor	Date 3-3-93
Name of inventor	
Signature of Ignaphar	Date

•	PATENT
Attorney's Docket No.	_
COMBINED DECLARATION AND I	POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PO CONTINUATION OF	
As a below named inventor, I hereby declare that:	
TYPE OF DECLAR	ATION
This declaration is of the following type: (check one	e applicable item below)
⊠ original	
☐ design	
□ supplemental	
NOTE: If the declaration is for an International Application continuation-in-part application do <u>not</u> check next ite	n being filed as a divisional, continuation of
□ national stage of PCT	, oneen appropriate one or last times nems.
NOTE: If one of the following 3 items apply then complete and CONTINUATION OR CIP.	l also attach ADDED PAGES FOR DIVISIONAL,
☐ divisional	
continuation	
continuation-in-part (CIP)	
INVENTORSHIP IDENT	IFICATION
WARNING: If the inventors are each not the inventors of all the claims of all the claims at the time the last claimed invention	s an explanation of the Lacts, including the ownership was made, should be submitted
My residence, post office address and citizenship a I believe I am the original, first and sole inventor (if on first and joint inventor (if plural names are listed below) of for which a patent is sought on the invention entitled:	re as stated below next to my name, ly one name is listed below) or an original,
TITLE OF INVENT	rion
Fluoroiodocarbon Blends as CFC and	d Halon Replacements
SPECIFICATION IDENT	IFICATION
the specification of which: (complete (a), (b) or (c))	
(a) ₩ is attached hereto.	
(b) □ was filed on or □ Express Mail No., as Serial No. not g and was amended on	yet known
NOTE: Amendments filed after the original papers are deposare not accorded a filing date by being referred to in a involved are those filed with the application papers of are those amendments claiming matter not encompa	sited with the PTO which contain new matter the declaration. Accordingly, the amendments or, in the case of a supplemental declaration
(c) was described and claimed in PC	T International Application No.
amended under PCT Article 19 on	(if anv).



ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information

 which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56

(also check the following items, if desired)

- and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and
- In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) 🖾 no such applications have been filed.
- (e) □ such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
	· ·	• • • • • • • • • • • • • • • • • • • •	□ YES NO □
			□ YES NO □
·			□ YES NO □
			□ YES NO □
			□ YES NO □

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a Continuation, divisional, or continuation-in-part, then, also complete ADDED PACES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Deborah Peacock

(check the following item, if applicable)

☐ Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Dr. Jon Nimitz 3300 Mountain Road NE Albuquerque, NM 87106-1920

Dr. Jon Nimitz (505) 256-1463

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of sole or fir	rst inventor <u>Jonathan Shelley Nim</u>	nitz
_Jonathan	Shelley	Nimitz
(GIVEN NAME)	Jorathan S. Nimity	FAMILY (OR LAST NAME)
Inventor's signature	forathan S. Wimity	
Date March 5 /	493 Country of Citizenship US	SA
Residence 3300 Mour	ntain Road NE	
	Albuquerque, NM 87106-1920	
		NM

	(Set 54-1)/92 Pub 605)	FORM 1-1	1-11
٦,	(Declaration and Power of Atto	rncy [1-1]—page 4 of 5)	
	Full name of second joint invento	r, if any <u>Lance Harrell L</u>	ankford
200		Harrell	Lankford
F	(GIVEN NAME)	(MODE WITH OR NAME)	FAMILY (OR LAST NAME)
	Inventor's signature dinea	1 Jampo	
	Date3-3-93	Country of Citizenship <u>USA</u>	
	Inventor's signature		
	Date	. Gountry of Citizenship	
	Residence 290 Welcome Road.	Newcastle, CA 95658	
	Post Office Address P. O. Box	381, Newcastle, CA 95	658
	1 031 011100 71001033		7 1

(Declaration and Power of Attorney [1-1]-page 5 of 5)

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

Signature for third and subsequent joint inventors. Number of pages added
Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added
Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. <i>Number of pages added</i>
• • •
Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application. □ Number of pages added
Humber of pages above
• • •
Authorization of attorney(s) to accept and follow instructions from representative
•••
If no further pages form a part of this Declaration then end this Declaration with this page and check the following item
 This declaration ends with this page